PTO/SB/06 (06-03)
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PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875							es it displays a valid OMB control number Application of Docket Number		
CLAIMS AS FILED PART I (Column 1) (Column 2).				SMALI	SMALL ENTITY		OTHER THAN SMALL ENTITY		
FOR NUMBER FILED		ED NU	MBER EXTRA	RATE	FEE		RATE	EEE	
(37 CFR 1.18(a))			. :		1	1	INTE	FEE	
TOTAL CLAIMS (37 CFR 1.16(c))	minus	3 20 =			+	OR		\$	
INDEPENDENT CLAIMS			<del></del>	-   × \$ =	-	OR .	X \$=		
(37 CFR 1.16(b)) minus 3 = . •				X \$=		ÖR	X \$=		
MULTIPLE DEPENDENT C	. + =		OR	4					
* If the difference in column	TOTAL		OR .	TOTAL					
CLAIN	AS AS AMENDE	D – PART II							
	olumn 1) CLAIMS	(Column 2)	(Column 3)	SMALL	ENTITY	OR	OTHEI SMALL	R THAN ENTITY	
9/9/5 RI	EMAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- JIONAL	
Total (37 CFR 1.16(c))	Minus	1 1/8	= /	X \$ =		0.7		FEE	
Z Independent (37 CFR 1.16(b))	3 Minus	1 1	=	X \$ =/		OR	× \$		
FIRST PRESENTATION	OF MULTIPLE DEPEN	DENT CLAUA (37	ZER 1:16(40)		<del></del>	OR	X s=	<del></del>	
	+ \$ = TOTAL		OR	+·\$=					
	·			ADD'L FEE	L	.OR	TOTAL ADD'L FEE		
	lumn 1) LAIMS	(Column 2)	(Column, 3)						
3/1/6 REI	MAINING AFTER NOMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
Total (37 CFR 1.16(c))	Minus	w		X \$ =				FEE	
Independent (37 CFR 1.16(b))	Minus	•••	=		<del></del>	OR _	× \$=	· · · · · · · · · · · · · · · · · · ·	
EIRST PRESENTATION		<u>l.:</u>	<u> </u>	× \$=		OR	X \$=		
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. (Col	umn 1)	(Column 2)	(Column 3)	· .				<del></del>	
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Total (37 CFR 1.16(c)) Independent (37 CFR.1.16(b))	Minus	-44		-	FEE			FEE	
Independent (	Minus	. 414 1	<u> </u>	X \$=		OR 2	K.\$=		
(3) CFR.(1.19(g))						OR .	< s=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						ori -	+ s =		
TOTAL						. 1	OTAL .		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".						OR . A	YDD,r ŁEĖ 🔽	<del></del>	
If the "Highest Number I "If the "Highest Number I The "Highest Number Pi	Previously Paid For Previously Paid For	IN THIS SPACE I	s less than 20, er	470 '	. •		٠.		

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.